

Hepatitis A Investigation – RI Definitions & Rules for Entering Investigation

Note: All fields in **RED** are required by the NEDSS system; all **BOLDED** fields are required by RI.

Brief Description or Field Name	Description	RI Rules for Data Entry		
	Investigation Summary			
Jurisdiction	The region responsible for the investigation	Required; RI has only 1 jurisdiction		
Program Area	The organizational ownership of the investigation. Program areas(e.g. General Communicable Diseases, Hepatitis, STD, HIV/AIDS, Vaccine Preventable) are defined by the conditions for which they provide primary prevention and control.	Required. This is pre-populated based on the condition. Select Hepatitis		
State Case ID	Open field to be used by OCD, if needed.	Leave blank.		
Investigation Start Date	Date the investigation was started.	Required		
Investigation Status	The status of the investigation: Open or Closed.	Leave as OPEN until the investigation is completed (i.e. until all pertinent facts necessary to evaluate the risk and determine if treatment is necessary.) Then change to closed		
Share record with Guests	This field indicates whether or not the record should be shared with all users who have guest privileges for the Program Area/Jurisdiction.	Defaults to checked. OK to leave checked. Not in use by RI at this time		
Investigator	The name of the person who is responsible for the case investigation	Required. Quick code = first initial of first name +first 5 letters of last name.		
Date assigned to Investigation	The date that the Investigation was assigned to the investigator or the date the investigator started the investigation if self-assigned	Required		



Brief Description or Field Name	Description	RI Rules for Data Entry		
Reporting Source				
Date of Report	Date first reported by reporting source if reported by phone or date received by person on-call if animal bite.	Required		
Reporting Source	Type of facility or provider associated with the source of information sent to Public Health. For Animal Rabies it would be the Health Laboratory	Leave Blank		
County	Date first reported to County	Leave blank		
Earliest Date Reported to State	Date first reported to State	Not required.		
Reporter	Search table for who Reported the case	Not required.		
	Clinical			
Physician	Search table for patient's physician.	Not required.		
Was the patient hospitalized for this illness?	•	Enter if Known If yes, enter "Hospital stay" information.		
Place of birth		Not required.		
Reason for testing	Determining why the patient was tested enables us to determine if the laboratory result is a false positive.			
Was the patient pregnant?	Assesses whether or not the patient is pregnant. For Female patients only.	Not required.		
Diagnosis Date	Date of diagnosis of condition being reported.	Not required.		
Is the patient symptomatic?	Symptoms for Hepatitis A include but are not limited to	Required. Verifies case definition		



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	fever, malaise, anorexia, nausea, light-colored stools, and dark urine.	
Was the patient jaundiced?	Yellowing of the skin and eyes.	Required. Verifies case definition.
Did the patient die from this illness?		Required.
	Laboratory	,
Liver Enzyme Levels at	Time of Diagnosis	
ALT (SGPT) Result	Alanine aminotransferase level	Required. Verifies case definition.
ALT Upper Limit Normal	Alanine aminotransferase level from reporting laboratory to determine if patient level is elevated.	Required. Verifies case definition.
AST (SGOT) Result	Aspartate aminotransferase level	Required. Verifies case definition.
AST Upper Limit Normal	Aspartate aminotransferase level from reporting laboratory to determine if patient level is elevated.	Required. Verifies case definition.
Date of ALT Result		Required. Verifies case definition.
Date of AST Result		Required. Verifies case definition.
Diagnostic Tests		
Total antibody to hepatitis A virus [total anti-HAV]	IgG anti-HAV appears in the convalescent phase of infection, remains for the lifetime of the person, and confers enduring protection against disease. The antibody test for total anti-HAV measures both IgG anti-HAV and IgM anti-HAV. The presence of total anti-HAV and absence of IgM anti-HAV indicates immunity consistent with either past infection or vaccination.	Enter if known



Brief Description or Field Name	Description	RI Rules for Data Entry		
IgM antibody to hepatitis A virus [IgM anti-HAV]	IgM anti-HAV. Virtually all patients with acute hepatitis A have detectable IgM anti-HAV. Therefore, the diagnosis of acute HAV infection is confirmed during the acute or early convalescent phase of infection by the presence of IgM anti-HAV in serum. IgM anti-HAV generally disappears within 6 months after onset of symptoms.	Required. Verifies case definition.		
Epi-Link				
there an epidemiologic	A patient that meets the clinical case definition and occurs in a person who has an epidemiologic link with a person who has laboratory-confirmed hepatitis A (i.e., household or sexual contact with an infected person during the 15-50 days before the onset of symptoms).	Required. Verifies case definition.		
	Epidemiolog	gic		
Case Status		Required.		
MMWR Week	MMWR Week for which case information is to be counted for MMWR publication.	Pre-entered field.		
MMWR Year	MMWR Year (YYYY) for which case information is to be counted for MMWR publication.	·		
	Diagnosis			
Diagnosis	condition.	Choose Acute Hepatitis A.		
	Administrativ	ve		



Brief Description or Field Name	Description	RI Rules for Data Entry
General Comments		
	Condition Specific Cu	stom fields
Bilirubin total	The normal level depends o the individual laboratory. Mo laboratories consider a level 1.1 milligrams per deciliter (mg/dl) or lower to be normal	st of Required. Indication of jaundice.
Bilirubin direct		Required. Indication of jaundice.
Bilirubin Date		Required. Indication of jaundice.
Jaundice Onset Date	Date of jaundice is considered the most reliable sign of symptom onset.	Required. Jaundice Onset date allows the investigator to calculate the infectious period (patients with hepatitis are most infectious from two weeks before onset of symptoms to one week after onset).
If patient is pregnant:		
Planned location for deliver		Not required.
OB Name		Not required.
OB Address		Not required.
What was the outcome of the pregnancy?		Not required.
If Live Birth, choose type:		Not required

Go to Acute Hepatitis A tab



Acute Hepatitis A Tab

Medical History	
	Required
Vaccine Information	
	Required
Vaccine Record	
	Required
Condition Specific Custom Fields	
	Required

Notes: